PTO/SB/01 (10-05)

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COMPLETE IF KNOWN

D.1587-PCT-US

R.Suplinskas

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Attorney Docket

Number

First Named Inventor

DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION

(37 CFR 1.63)					Application Number 10/535,377				
	Declaration	X Declarat		Filing Date	9		19,20		
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	Filing	(37 ČFR required	R 1.16 (e)) J)	Examiner	Name		be ass		
<u> </u>							DE 055	Talled	
l here	by declare that:	•	•						
Each i	nventor's residence, ma	iling address, a	nd citizenship are	as stated b	elow next to	their name			
	ve the inventor(s) named		•	inventor(s)	of the subject	t matter w	hich is claim	ned and for	
			ND METHOD MAGNESIUM						
ļ			IBORIDE W		IDE AND	DOPEL	,		
L			(Tillo of the	Invention)	·				
the sp	ecification of which		(TILIO OT LITE	i iriv o riuorij					
	is attached hereto								
	OR:								
X	was filed on (MM/DD/Y	YYY) 05	/19/2005	as Uni	ted States Ap	plication N	lumber or P	CT International	
Applic	ation Number		and was amende	ed on (MM/I	OD/YYYY)			(if applicable).	
	by state that I have revie ded by any amendment			s of the abo	ve identified	specification	n, including	the claims, as	
	• •					d.Ed !-	27 OFD 4	EG implication for	
contin	nowledge the duty to di uation-in-part application ne national or PCT intern	ns, material info	ormation which be	came avail	able between	aennea in the filing	date of the	prior application	
I here	by claim foreign priority	benefits unde	r 35 U.S.C. 119(a	a)-(d) or (f)	or 365(b) o				
invent	or's or plant breeder's r ry other than the United	ights certificate States of Amer	(s), or 365(a) of a ica. listed below a	ny PCT inte	ernational app so identified b	plication w below, by c	hich design: hecking the	ated at least one box, any foreign	
applic	ation for patent, inventor that of the application of	r's or plant bree	der's rights certific						
	Foreign Application	1	Foreign Filin		Prior			Copy Attached?	
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[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

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DECLARATION — Utility or Design Patent Application

correspondence to:	he address ssociated with ustomer Number:	0 0 3	5 7 4	OR	X	Correspondence address below
Name Attorno	ey John E.	Toupal				
Address 116 Cor	ncord Stree	et				
City Framin	gham		State	MA		ZIP 01702
Country U.S.	Te	elephone 508-872-3	3781	Ema to	-	law@juno.com
Petitioner/applicant is caution contribute to identity theft. In numbers (other than a check of the USPTO to support a petition the USPTO, petitioners/application to the USPTO. Petition publication of the application (or issuance of a patent. Furthapplication is referenced in authorization forms PTO-2036 publicly available. I hereby declare that all states and belief are believed to be statements and the like so may false statements may jeopardi	Personal information or credit card authorized on or an application ants should consider the record a publication and a publication application applic	a such as social ization form PTO- in. If this type of it redacting such ised that the recation request in cold from an aband ation or an issument purposes a cold from which is these stations of my own know that these stations or imprisons in the cold from the cold fr	mation in c security no -2038 subm personal in personal in personal in ord of a prompliance oned applicated patent re not retain	umbers, bank a nitted for paymer formation is inclusion from the atent application with 37 CFR 1.2 cation may also (see 37 CFR 1 ined in the appliance and that allere made with a both, under 18 between the appliance of the appl	nt purpose uded in the documents availated (13(a) is be availated (1.14). (cation fi	numbers, or credit card ses) is never required by documents submitted to iments before submitting ilable to the public after made in the application) ilable to the public if the Checks and credit card ile and therefore are not into made on information wiedge that willful false
NAME OF SOLE OR FIRST I	NVENTOR:	ПАр	etition has l	been filed for this	s unsign	ed inventor
Given Name (first and middle	[if any])			Family Name o		
Raymond J.				Suplins	kas	
Inventor's Signature						Date
Residence: City	State		Country		Citizen	ship
Haverhill	Massachus	setts	U.S	•	U.	S.
Mailing Address		······································	· · · · · · · · · · · · · · · · · · ·	·····		······································
1000 North::Broad	dway					
City Haverhill	State MA		Zip	01832		Country U.S.
X Additional inventors or a legal r	epresentative are being n	amed on the	suppleme	ental sheet(s) PTO/S	B/02A or 0	DZLR attached hereto.

Country

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid DMB control number.

DECLARATION Supplemental Sheet For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

Enter Deceased or Incapacitated Inventor's Name R	aym	ond J.	Su	<u>plinska</u> s	Page_	_1_ of _1_	
Name of Legal Representative:	A petit	tion has been fi	led fo	or this non-signing leg	al representa	itive	
Given Name (first and middle (if any))		Family Nam					
Janet		Supli	ns	kas		 	
Legal Representative's grant Suplement Signature Recidence: City Have a bill	w				Date # .1	/31/06	
Residence: City Haverhill	State	MA	Cou	ntry U.S.	Citizenship	U.S.	
Mailing Address 1000 North Broadway		• · · · · · · · · · · · · · · · · · · ·					
Mailing Address							
City Haverhill		State MA		Zip 01832	Country	U.S.	
Name of Additional Legal Representative, if any	y:	A petition	n has	been filed for this nor	n-signing lega	al representative	
Given Name (first and middle (if any))				Family Name or	Sumame		
Legal Representative's Signature							
Residence: City	State)		Country		Citizenship	
Mailing Address							
Mailing Address							
City	State)		Zip	Country		
Name of Additional Legal Representative, if any	:	A petition	n has	been filed for this nor	n-signing lega	al representative	
Given Name (first and middle (if any))				Family Name or	Sumame		
Legal Representative's Signature		Date					
Residence: City	State)		Country		Citizenship	
Mailing Address							
Mailing Address							
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This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

State

City

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	Raymond J. Suplinskas
For:	SUBSTRATE AND METHOD FOR THE FORMATION OF CONTINUOUS MAGNESIUM DIBORIDE AND DOPED MAGNESIUM DIBORIDE WIRES
The specification which:	
was filed on May 1	19, 2005 as Application No. 10/535,377 .
PROOF OF AU	THORITY OF ADMINISTRATOR(TRIX)
EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE
The Declaration for the above deceased inventor, Raymon	re identified application as signed on behalf of the ond J. Suplinskas,
by Janet Suplins	kas, legal representative
signatory Y ganet &	uplenskas
A certificate of the clerk of a	competent court or the register of wills that the

Voluntary Administration Commonwealth of Massachusetts

Commonwealth of Massachusetts The Trial Court

Probate and Family Court Department

	•	
Docket	No.	

Wife Wife

Voluntary Administration

Name of Decedent Raymond Joseph Suplinskas			
	· · · · · · · · · · · · · · · · · · ·		
Domicile at Death 1000 North Broadway	Haverhill	Essex	01832
(Street and No.)	(City or Town)	(County)	(Zip)
Date of Death June 10, 2005			
Death Certificate shall be filed with application.	1000 Nonel Beac	Janes Harrank d	11
тапто апто постору при	as, 1000 North Broa Status Surviving s		11,
<u>MA 01832</u> (Appointment of legal representative on beha	If of a deceased in	ventor (35 U.	s.c. 11
Your applicant(s) respectfully state(s) that said estate consi			
which does not exceed fifteen thousand dollars (\$15,000) e			
he following schedule of all the assets of said deceased kr	nown to the applicant(s):		•
Name of Property		Estimated Valu	•
Application of Raymond J. Suplinskas for U.S	. Patent \$	1.00	e .
Application No. 10/535,377	\$		
	\$		
	\$_	1.00	
	Total \$_	1.00	
			mity with
That to the knowledge of the applicant(s) the following are the vith the deceased, were joint owners of property: also listed ake under the provisions of Section 3 of Chapter 190 in the Surviving joint owner: Janet Suplinskas,	d are the names and add	resses of those way, Haverhill,	ving who, ho would MA 018
That to the knowledge of the applicant(s) the following are the vith the deceased, were joint owners of property: also listerate under the provisions of Section 3 of Chapter 190 in the Surviving joint owner: Sec. 3. Chapter 190: Janet Suplinskas, The applicant(s) hereby certif 1es that a copy of this contribute has been sent by certified mail to the Division of Massachusetts 01615-9906.	d are the names and addice case of intestacy. 1000 North Broadwa 1000 North Broadwa	resses of those way, Haverhill, by, Haverhill, py of the deceder O. Box 15205, We	ving who, ho would MA 018 MA 018 nt's death orcester,
That to the knowledge of the applicant(s) the following are the vith the deceased, were joint owners of property: also listerate under the provisions of Section 3 of Chapter 190 in the Surviving joint owner: Janet Suplinskas, Sec. 3, Chapter 190: Janet Suplinskas, The applicant(s) hereby certifies that a copy of this copy of this copy of the sertificate has been sent by certified mail to the Division of Massachusetts 01615-9906.	d are the names and address of intestacy. 1000 North Broadwa 1000 North Broadwa document, along with a co f Medical Assistance, P. gnature(s) Janet Supl	resses of those way, Haverhill, by, Haverhill, py of the deceder O. Box 15205, We	ving who, ho would MA 018 MA 018 nt's death orcester,
That to the knowledge of the applicant(s) the following are the vith the deceased, were joint owners of property: also listerate under the provisions of Section 3 of Chapter 190 in the Surviving joint owner: Sec. 3. Chapter 190: Janet Suplinskas, The applicant(s) hereby certifies that a copy of this contribute has been sent by certified mail to the Division of Massachusetts 01615-9906. Date January 31, 2006 Signature of the applicant(s) the provision of the details of the deta	d are the names and address of intestacy. 1000 North Broadwa 1000 North Broadwa document, along with a co f Medical Assistance, P. gnature(s) Janet Supl	resses of those way, Haverhill, by, Haverhill, by of the deceder O. Box 15205, Wallingham	ving who, ho would MA 018 MA 018 nt's death orcester,
Sec. 3, Chapter 190: Janet Suplinskas, The applicant(s) hereby certif <u>les</u> that a copy of this certificate has been sent by certified mail to the Division of Massachusetts 01615-9906 . Date January 31, 2006 Signottant	d are the names and addition of case of intestacy. 1000 North Broadwa 1000 North Bro	resses of those way, Haverhill, by, Haverhill, by of the deceder O. Box 15205, Was an analysis of the deceder o	ving who, ho would MA 018 MA 018 nt's death orcester,

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